Form One

Interim Designation of Agent to Receive Notification of Claimed Infringement

- Res	Seasch and Technology Park Corporation
Alternativ doing bus	we Name(s) of Service Provider (including all names under which the service provider is siness):
Address o	of Service Provider: Coix Campus
Name of A	Agent Designated to Receive Kingshill, VI 00850-9781
Notification	on of Claimed Infringement: David M. Zumwalt, Executive Direct
designatio	ess of Designated Agent to which Notification Should be Sent (a P.O. Box or similar on is not acceptable except where it is the only address that can be used in the c location): UVI RT Park UVI St. Craix Campus
	RR 1 Box 10000 Kingshin, UI 00850-9781
Telephone	Number of Designated Agent: (340) 692-4200
Facsimile	Number of Designated Agent: (340) 692-4212
Email Add	dress of Designated Agent:AUPadmin @ uvirtpark.com
Signature of	of Officer or Representative of the Designating Service Provider: Date: Date:
Typed or P	Printed Name and Title: David M. Zumwalt
	Executive Director

0 0 8 07 - 2009

Note: This Interim Designation Must be Accompanied by a \$80 Filing Fee Made Payable to the Register of Copyrights.



